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Revision:	HCFA-PM-91- 4 (BPD) AUGUST 1991		OMB No.:	0938-
	State: _	IDAHO		
	SECT	TION 2 - COVERAGE AND E	LIGIBILITY	
Citation 42 CFR	2.1	Application, Determi Furnishing Medicaid	nation of Eligibili	ty and

(a) The Medicaid agency meets all requirements of 42 CFR Part 435, Subpart J for processing applications, determining eligibility, and furnishing Medicaid.

TN No. 9/-9 Supersedes Approval Date 1/2/192 Effective Date 10/19/ TN No. 25-12 HCFA ID: 7982E

Subpart J

(MB)

Revision: HCFA-PM-93-2

	State:		IDAHO
Citation 42 CFR 435.914 1902(a)(34) of the Act	,	(1)	Except as provided in items 2.1(b)(2) and (3) below, individuals are entitled to Medicaid services under the plan during the three months preceding the month of application if they were, or on application would have been eligible. The effective date of prospective are retroactive eligibility is specified in ATTACHMENT 2.6-A.
1902(e)(8) 1905(a) of Act		(2)	For individuals who are eligible for Medicare cost-sharing expenses as qualified Medicare beneficiaries under section 1902(a)(10)(E)(i) of the Act, coverage is available for services furnished after the end of the month in which the individual is first determined to be a qualified Medicare beneficiary. ATTACHMENT 2.6-specifies the requirements for determination of eligibility for this group.
1902(a)(47) 1920 of the		_ (3)	Pregnant women are entitled to ambulatory prenatal care under the plan during a presumptive eligibility period in accordance with section 1920 of the Act. ATTACHMENT 2.6-8 specifies the requirements for determination of eligibility for this group.
42 CFR 434.20			e Medicaid agency elects to enter into a risk
			Qualified under title XIII of the Public Health Service Act or is provisionally qualified as an HMO pursuant to section 1903(m)(3) of the Social Security Act.
			Not Federally qualified, but meets the requirements of 42 CFR 434.20(c) and is defined in <u>ATTACHMENT 2.1-A</u> .
		_X	Not applicable.

Revision: HCFA-PM-91-8 (MB)

October 1991

OMB No.

State/Territory:

IDAHO

Citation

1902(a)(55) of the Act 2.1(d)

The Medicaid agency has procedures to take applications, assist applicants, and perform initial processing of applications from those low income pregnant women, infants, and children under age 19, described in \$1902(a)(10)(A)(i)(IV), (a)(10)(A)(i)(VII), and (a)(10)(A)(ii)(IX) at locations other than those used by the title IV-A program including FQHCs and disproportionate share hospitals. Such application forms do not include the ADFC form except as permitted by HCFA instructions.

TN No. 9(-)2Supersedes Approval Date -23-92TN No. 9(-1)

Effective Date /৩-/- %/

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